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06/20/03

UTILITY PATENT APPLICATION TRANSMITTAL		<i>Attorney Docket No.</i>	126387.530	
		<i>First Inventor</i>	Powis	
		<i>Title</i>	Uses of Thioredoxin	
(Only for new nonprovisional applications under 37 CFR 1.53(b))		<i>Express Mail Label No.</i>	ER222687198US	
APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231		
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification [Total Pages 86] (preferred arrangement set forth below) <ul style="list-style-type: none"> - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure </p> <p>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 33]</p> <p>5. Oath or Declaration [Total Pages 3] <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). </p> <p>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>		<p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) <ul style="list-style-type: none"> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies </p>		
		ACCOMPANYING APPLICATION PARTS		
		<p>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)</p> <p>11. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input type="checkbox"/> Preliminary Amendment</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input checked="" type="checkbox"/> Other: Cert. of Mailing; Power of Attorney</p>		
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:		<input checked="" type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: 09 , 875,578 <i>Prior application information:</i> Examiner: Davis, Minh Tam B Group Art Unit: 1642		
		For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.		
19. CORRESPONDENCE ADDRESS				
<input checked="" type="checkbox"/> Customer Number or Bar Code Label <small>(Insert Customer No. or Attach bar code label here)</small>		<input type="checkbox"/> Correspondence address below		
Name	Pepper Hamilton LLP			
Address	500 Grant Street, 50th Floor One Mellon Bank Center			
City	Pittsburgh	State	PA	Zip Code
Country	US	Telephone	412.454.5000	Fax
Name (Print/Type)	Raymond A. Miller	Registration No. (Attorney/Agent)	42,891	
Signature			Date	06/20/2003

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17169 U.S. PTO
06/20/03

PTO/SB/17 (05-03)

Approved for use through 04/30/2003, OMB 0651-0032
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FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 583.00)

Complaint if Known

Application Number	not yet assigned
Filing Date	June 20, 2003
First Named Inventor	Powis
Examiner Name	not yet assigned
Art Unit	not yet assigned
Attorney Docket No.	126387.530

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None
 Deposit Account:

Deposit Account Number
50-0436

Deposit Account Name
Pepper Hamilton LLP

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments

Charge any additional fee(s) during the pendency of this application

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 750	2001 375	Utility filing fee	375.00
1002 330	2002 165	Design filing fee	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$ 375.00)			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			
Fee from Extra Claims Fee Paid			
Total Claims	7	-20** = 0 X 0 = 0	
Independent Claims	7	- 3** = 4 X 42 = 168	
Multiple Dependent			
SUBTOTAL (2) (\$ 168.00)			
*or number previously paid, if greater; For Reissues, see above			
Other fee (specify) _____			
*Reduced by Basic Filing Fee Paid			
SUBTOTAL (3) (\$ 40.00)			

SUBMITTED BY

(Complete if applicable)

Name (Print/Type)	Raymond A. Miller	Registration No. (Attorney/Agent)	42,891	Telephone	412.454.5000
Signature					
Date	June 20, 2003				

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.10

APPLICANT: Garth Powis
TITLE: Uses of Thioredoxin
SERIAL NO.: Not yet assigned
ATTORNEY REF: 126387.530
DATE OF DEPOSIT: June 20, 2003
EXPRESS MAIL NO. ER 222687198US

I HEREBY CERTIFY THAT THIS PATENT APPLICATION IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE VIA UNITED STATES POST OFFICE EXPRESS MAIL UNDER 37 C.F.R. § 1.10 ON THE DATE INDICATED ABOVE AND IS ADDRESSED TO THE COMMISSIONER OF PATENTS, MAIL STOP PATENT APPLICATION, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450.

Kathleen Pujol

(Typed or printed name of person mailing paper or fee)



(Signature of person mailing paper or fee)

Documents Sent:

Application (86 sheets)
 Declaration
 Applicant Data Sheet
 Formal Drawings (33 sheets)

New Utility Application Transmittal
 Assignment with cover sheet in duplicate
 Other Fee Transmittal & Check for \$583.00
 Other Certificate of Mailing